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The Meaning of Dysmature

To the Editor: I should like to question Dr. Gluck's use of the term *dysmature* to describe all babies "who at birth are small for their length of gestation." Classically this term has been used to describe babies who are long and thin at birth.^{2,3} The implication being that these babies are born malnourished secondary to placental dysfunction.

Many descriptive phrases have been coined to describe the baby who is both light of weight and short in length at birth, e. g. pseudoprematurity, intrauterine growth retardation, low-birth-weight dwarfism, small-for-dates, and small-for-gestational age. To widen the concept of the word dysmature to include infants affected by a variety of genetic and chromosomal diseases, multiple malformation syndromes and intrauterine infections would, it seems to me, only lead to further confusion.

The confusion already present in the literature is aptly shown by a recent article which proposed to demonstrate fetal asphyxia in infants with intrauterine growth retardation. Actually what the authors described was fetal distress in dysmature babies, a finding published at least 14 years previously.

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The CALPAC Record

To the Editor: As Chairman of the California Medical Political Action Committee (CALPAC) I would like to salute you for your very excellent and perceptive editorial (AMPAC-CALPAC) in the November issue of California Medicine.

Now that the November election results are known, I would like to report to you on our record of success. Totally, we contributed to 130 candidates running for state and federal office in California. Fifty-seven percent of them were Republicans and 43% were Democrats. Three of these candidates were defeated in the June primary and two were not up for re-election until 1974. Of the remaining 125 who appeared on the November ballot, 108 were elected to office. Our success record of 86% is unsurpassed in light of the extent of our political action activity.

As you stated "political committees are important, but alone they are not enough, and this truth should never be forgotten." Our hope, of course, is that medicine will take advantage of the opportunity that this political action affords and have in-put with those legislators on issues affecting the practice of medicine and our patients.

AMPAC and CALPAC's goal through political action is to establish a climate for improved com-